



# 2007 ECONOMIC CENSUS

## Confectioneries

**DUE DATE**  
**FEBRUARY 12, 2008**

**Mail** your completed form to:  
**U.S. CENSUS BUREAU**  
**1201 East 10th Street**  
**Jeffersonville, IN 47134-0001**

**WH-42417**

**INFORMATION COPY  
DO NOT USE TO REPORT**

**Please read** the accompanying information sheet(s) before answering the questions.

**Need help or have questions about filling out this form?**

**Visit** [www.census.gov/econhelp](http://www.census.gov/econhelp)

**Call** 1-800-233-6136, between 8:00 a.m. and 6:00 p.m., Eastern time, Monday through Friday.

- OR -

**Write** to the address above. Include your 11-digit Census File Number (CFN) printed in the mailing address.

(Please correct any errors in this mailing address.)

**YOUR RESPONSE IS REQUIRED BY LAW.** Title 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the U.S. Census Bureau. By the same law, **YOUR CENSUS REPORT IS CONFIDENTIAL.** It may be seen only by persons sworn to uphold the confidentiality of Census Bureau information and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.

- Use blue or black ballpoint pen.
  - Please center numbers in their respective boxes.
  - Do not use pencil or felt-tip pen.
  - Do not put slashes through 0 or 7.
  - Place an "X" inside the box.
- Examples:  0 1 2 3 4 5 6 7 8 9

The reporting unit for this form is an establishment. An **establishment** is generally a single physical location where business is conducted or where services or industrial operations are performed. For further clarification, see information sheet(s).

### 1 EMPLOYER IDENTIFICATION NUMBER

Is the Employer Identification Number (EIN) shown in the mailing address the same as the one used for this establishment on its latest 2007 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?

0021  Yes - Go to 2      0022  No - Enter current EIN (9 digits) → 0025

### 2 PHYSICAL LOCATION

**A.** Is this establishment's physical location the same as shown in the mailing address? (P.O. Box and rural route addresses are not physical locations.)

0031  Yes - Go to line B

0032  No - Enter physical location →

0035 Number and street		
0036 City, town, village, etc.	0037 State	0038 ZIP Code

**B.** Is this establishment physically located inside the legal boundaries of the city, town, village, etc.? (Mark "X" only ONE box.)

0041  Yes      0042  No      0043  No legal boundaries      0044  Do not know

**C.** In what type of municipality is this establishment physically located? (Mark "X" only ONE box.)

0046  City, village, or borough      0047  Town or township      0048  Other      0024  Do not know

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**3 OPERATIONAL STATUS**

Which ONE of the following best describes this establishment's operational status at the end of 2007?  
(Mark "X" only ONE box.)

0011  In operation 0013  Temporarily or seasonally inactive

0014  Ceased operation - Give date at right \_\_\_\_\_ → 

Month	Day	Year

0015  Sold or leased to another operator - Give date at right \_\_\_\_\_ → 

Month	Day	Year

  
AND enter name and address of new owner or operator and Employer Identification Number (EIN) below ↴

0060 Name of new owner or operator	0061 EIN (9 digits)
	-

0062 Mailing address (Number and street, P.O. Box, etc.)

0063 City, town, village, etc.	0064 State	0065 ZIP Code
		-

0016  Other - Specify \_\_\_\_\_ → 0815 \_\_\_\_\_

**4 MONTHS IN OPERATION**

Mark "X" if None 

2007
Number

Number of months in operation during 2007 (If none, mark "X" and go to 30.) . . . . . 0002

**HOW TO REPORT DOLLAR FIGURES**



Dollar figures should be **rounded to thousands** of dollars.

If a figure is **\$1,025,628.79**:

If a value is "0" (or less than \$500.00):

**Report** →

**Report** →

Mark "X" if None

2007			
\$ Bil.	Mil.	Thou.	Dol.
	1	026	

**5 SALES, SHIPMENTS, RECEIPTS, OR REVENUE**

**A.** Sales and operating receipts (Include the gross selling value of business conducted for others. Include shipping and handling charges. Exclude sales taxes and Hawaii's General Excise Tax.) . . . . . 0100

**B.** Did this establishment earn commissions for the sale of merchandise?

1121  Yes - Go to line C

1122  No - Go to line E

**C.** Gross selling value of business conducted on a commission basis (Include on line A.) . . . . . 1123

**D.** Commissions received on transactions reported on line C . . . . . 1124

**E.** Is this the only establishment of this firm?

0907  Yes - Go to line G

0908  No - Go to line F

**F.** Percent of products sold by this establishment manufactured or mined in the United States by **your company** or its subsidiaries. . . . . 1125

**G.** Did e-commerce account for more than 50% of this establishment's sales and/or operating receipts as reported on line A?

0308  Yes

0309  No

Mark "X" if None

2007			
\$ Bil.	Mil.	Thou.	Dol.

2007			
\$ Bil.	Mil.	Thou.	Dol.

Mark "X" if None

2007
Percent
%

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**If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.**

**6** Not Applicable.

**7** EMPLOYMENT AND PAYROLL

**Include:**

- Full- and part-time employees working at this establishment whose payroll was reported on Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed under the Employer Identification Number (EIN) shown in the mailing address or corrected in 1.

**Exclude:**

- Temporary staffing obtained from a staffing service.
- Contractors, subcontractors, or independent contractors.
- Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.
- Purchased or managed services, such as janitorial, guard, or landscape services.
- Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.

For further clarification, see information sheet(s).

Mark "X" if None

2007			
Number			

**A.** Number of employees for pay period including March 12 . . . . . 0320

Mark "X" if None

2007			
\$ Bil.	Mil.	Thou.	Dol.

**B.** Payroll before deductions (Exclude employer's cost for fringe benefits.)

1. Annual payroll . . . . . 0300

2. First quarter payroll (January-March, 2007) . . . . . 0310

**8** Not Applicable.

**9** VALUE OF INVENTORIES

**A.** Did this establishment own inventories, regardless of where held, at the end of 2007 and/or 2006?

0486  Yes - Go to line B

0487  No - Go to 16

**B.** Report inventories for products owned by this establishment as of December 31.

**1. Total inventories before Last-in, First-out (LIFO) adjustment (if any)** . . . . . 0460

**2. LIFO reserve (if any)** . . . . . 0466

**3. Total inventories after LIFO adjustment (Line B1 minus line B2)** . . . . . 0468

Mark "X" if None

End of 2007			
\$ Bil.	Mil.	Thou.	Dol.

Mark "X" if None

End of 2006			
\$ Bil.	Mil.	Thou.	Dol.

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**10 INVENTORIES BY VALUATION METHOD**

Report how much of the inventory reported in 9, line B1 for 2007 is subject to the following valuation methods.

Mark "X" if None

2007			
\$ Bil.	Mil.	Thou.	Dol.

A. LIFO valuation method before adjustment . . . . . 0244

B. First-in, First-out (FIFO) . . . . . 0491

C. Average cost . . . . . 0492

D. Standard cost . . . . . 0493

E. Other valuation method - Specify method ↴

0895

0494

F. **TOTAL** (Add lines A through E. Total should equal 9, line B1.) . . . . . 0490

**11-15** Not Applicable.

**16 SELECTED EXPENSES**

Mark "X" if None

2007			
\$ Bil.	Mil.	Thou.	Dol.

A. Operating expenses (Include payroll. Exclude cost of goods sold and interest expense.) . . . . . 0140

B. Purchases of merchandise for resale, net of returns, allowances, and trade and cash discounts (Include amounts allowed for trade-ins.) . . . . . 1160

C. For the value reported on line B, were any of these goods ordered over an Internet, Extranet, Electronic Data Interchange (EDI) network, electronic mail, or other online system?

0441  Yes

0442  No

0443  Do not know

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If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

17 and 18 Not Applicable.

**19 A. KIND OF BUSINESS**

Which ONE of the following best describes this establishment's principal kind of business in 2007?  
(Mark "X" only ONE box.)

- 0700 424 450 00 1  Confectioneries, including candy, nuts, chips, and popcorn
- 424 940 00 1  Tobacco and tobacco products
- 424 490 20 1  Bread and baked goods, including baking ingredients and spices
- 424 410 00 1  General-line groceries, including dried milk
- 424 490 60 1  Other grocery specialties
- 771 000 00 1  Other kind of business - Specify ↴

0701

**19 B. TYPE OF OPERATION**

Which ONE of the following best describes this establishment's principal type of operation in 2007?  
(Mark "X" only ONE box.)

**Merchant wholesaler, buying and selling on own account**

- 0600 12  Importer
- 13  Exporter
- 11  Merchant wholesale distributor or jobber
- 14  Own-brand importer and marketer
- 20  **Manufacturers' sales branch or office**

**Agent, broker, or commission merchant**

- 41  Auction company
- 42  Broker, representing buyers and sellers
- 43  Commission merchant
- 44  Import agent
- 45  Export agent
- 46  Manufacturers' agent
- 49  **Electronic market - business-to-business marketplace that facilitates the sale of goods via the Internet or other electronic means, and operates on a commission or fee basis**
- 77  **Other broker or agent - Specify ↴**

0601

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**21 METHOD OF SELLING**

Which ONE of the following best describes this establishment's principal method of selling in 2007?  
(Mark "X" only ONE box.)

- 0751  Electronic commerce (selling goods or facilitating the sale of goods via the Internet or other electronic means)
- 0752  Store or display showroom (selling from a fixed or permanent location with physical displays of priced merchandise and/or from a counter)
- 0753  Warehouse or office (including telephone/fax orders or outside sales representatives)
- 0754  Mail order
- 0755  Home shopping via television
- 0756  Direct selling (selling in a face-to-face manner away from a fixed location, such as house-to-house, party plan, or temporary kiosk sales)
- 0757  Vending machines
- 0758  Other - Specify ↴

0759

**HOW TO REPORT PERCENTS**

If figure is **38.76%** of total sales:

**Report whole percents**

2007				
Estimates are acceptable. Report dollars OR percents.				
\$ Bil.	Mil.	Thou.	Dol.	Percent
				3 9

**22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE**

(Report sales for each product line sold by this establishment, either as a dollar figure or as a whole percent of total sales reported in 5, line A. Include the value of merchandise marketed under capital, finance, or full payout leases, and rental receipts derived from merchandise under operating leases. See HOW TO REPORT DOLLAR FIGURES on page 2 and HOW TO REPORT PERCENTS above. Do not combine data for two or more lines.)

Description of sales, shipments, receipts, or revenue	Census use	2007								
		Estimates are acceptable. Report dollars OR percents.								
		\$ Bil.	Mil.	Thou.	Dol.	Percent				
0723	0720	0721								0722
<b>1. Confectioneries</b>										
<b>a.</b> Chips and popcorn .....	14414									
<b>b.</b> Candy .....	14411									
<b>c.</b> Chewing gum .....	14412									
<b>d.</b> Nuts .....	14413									
<b>e.</b> Other confectioneries .....	14415									
<b>f. Sum lines 1a through 1e</b> .....	14400									
<b>2.</b> Soft drinks, bottled water, and nonalcoholic beverages .....	14850									
<b>3.</b> Coffee, tea, and powdered drink mixes .....	14800									
<b>4.</b> Bread, baked goods, and baking ingredients .....	14820									

CONTINUE WITH 2 ON PAGE 8

CONTINUE ON PAGE 8

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**22** DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued

Description of sales, shipments, receipts, or revenue	Cen- sus use	2007					
		Estimates are acceptable. Report dollars OR percents.					
		\$ Bil.	Mil.	Thou.	Dol.	Percent	
0723	0720	0721				0722	
<b>5.</b> Packaged frozen food . . . . .	14100						
<b>6.</b> Fresh meat and meat products . . . . .	14600						
<b>7.</b> Nonperishable (canned) food . . . . .	14830						
<b>8.</b> Dairy products, excluding dried, canned, condensed, and evaporated dairy products . . . . .	14200						
<b>9.</b> Food and beverage basic materials, including flavoring extracts, fruit peel, sausage casings, hop extract, malt, and yeast . . . . .	14870						
<b>10.</b> Grocery specialties, including pasta and pet food . . . . .	14880						
<b>11.</b> Paper and plastic products . . . . .	13400						
<b>12.</b> Tobacco and tobacco products . . . . .	15900						
<b>13.</b> Pharmaceuticals, pharmaceutical supplies, cosmetics, and toiletries, including veterinarians' medicines . . . . .	13500						
<b>14.</b> Janitorial equipment and supplies . . . . .	12520						
<b>15.</b> Miscellaneous commodities - <i>Specify</i> ↴							
<b>a.</b> _____	19811						
<b>b.</b> _____	19812						
<b>c.</b> _____	19813						
<b>16.</b> Service receipts and labor charges, including installed parts . . . . .	19700						
<b>17.</b> Receipts for harvesting, cleaning, shelling, and other farm product preparation services . . . . .	19920						
<b>18.</b> Rental and operating lease receipts . . . . .	19940						
<b>19. TOTAL</b> (Should equal 5, line A if reporting in dollars.) . . . . .	19990						1 0 0

**23** Not Applicable.

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**24** SHIPPING AND HANDLING

**A.** Did this establishment have any receipts from customers for shipping and handling of merchandise in 2007?

0981  Yes - Go to line B

0982  No - Go to **26**

2007			
Estimates are acceptable			
\$ Bil.	Mil.	Thou.	Dol.

**B.** Receipts of this establishment from customers for shipping and handling of merchandise. . . . . 0985

**C.** Are receipts for shipping and handling included in sales and receipts (reported in **5**, line A)?

0988  Yes

0989  No

**25** Not Applicable.

**26** SPECIAL INQUIRIES

**A.** EMPLOYMENT BY PRIMARY FUNCTION

(List the number of employees reported in **7**, line A, by the employee's primary function.)

- 1. Selling . . . . . 1131
- 2. Sales support - including office, clerical, warehousing, customer service, maintenance employees, and drivers . . . . . 1132
- 3. General support of other establishments in your company - including central administrative, accounting, research, and other support employees . . . . . 1133
- 4. Packaging . . . . . 1135
- 5. Production - including employees who manufacture products from raw materials or semi-finished products (Report 'knockdown' assembly employees on line 6 below.) . . . . . 1136
- 6. 'Knockdown' assembly - assembling prefabricated components designed for a single application or reassembly of completed products . . . . . 1134
- 7. Other - Specify **7**  
 0837  . . . . . 1137
- 8. **TOTAL** (Add lines 1 through 7. Total should equal **7**, line A.) . . . . . 1138

Census use	2007			
	Paid employees			

**B.** GENERAL LINE GROCERIES

Mark "X" only ONE box if this establishment is a:

- 1181  Voluntary group wholesaler (An establishment affiliated with independent retailers engaged in joint sales promotions under a group name)
- 1182  Retail-cooperative wholesaler (An establishment owned and operated cooperatively by independent retailers buying collectively)
- 1183  Other grocery wholesaler

CONTINUE WITH **26** ON PAGE 10

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**26** SPECIAL INQUIRIES - Continued

**C. PERCENT OF DROP SHIPPED SALES**

Percentage of sales (reported in **5**, line A) that were drop shipped and did not enter this establishment . . . . . 1111

2007	
Whole percent of sales and receipts	
	%

**D. OTHER ESTABLISHMENT ACTIVITIES**

**1.** Did this establishment design, engineer, or formulate the manufactured products that it sold, produced, or shipped?

0318  Yes

0319  No

**2.** Which of the following best describes this establishment's primary activity? (Mark "X" only ONE box.)

0362  Providing contract manufacturing services for others

0363  Transforming raw materials or components into new products that this establishment owns or controls

0364  Reselling goods manufactured by others (with or without minor final assembly)

0365  Other - Specify ↴

0366

**3.** Did this establishment purchase contract manufacturing services from other companies or other establishments of your company to process materials or components that this establishment owns or controls?

0496  Yes, primarily with establishments WITHIN the 50 States and the District of Columbia

0497  Yes, primarily with establishments OUTSIDE of the 50 States and the District of Columbia

0498  No

**27-29** Not Applicable.

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REMARKS (Please use this space for any explanations that may be essential in understanding your reported data.)

**30** CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions.

Is the time period covered by this report a calendar year?

Yes

No - Enter time period covered →

FROM	Month	Year	TO	Month	Year

Name of person to contact regarding this report

Title

Telephone	Area code	Number		Extension	Fax	Area code	Number	
		-					-	

Internet e-mail address

Date completed

Month	Day	Year

**Thank you for completing your 2007 ECONOMIC CENSUS form.**

**PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.**

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